

REGISTERED OWNER NOTARIZED CERTIFICATION

(FOR APPLICATIONS SUBMITTED BY A REGISTRATION SERVICE)

| LICENSE PLATE/CF NUMBER | VEHICLE/VESSEL IC | VEHICLE/VESSEL ID NUMBER | | YEAR/MAKE | | |
|--|--|--------------------------|---------------|---------------|--------------------------------|--|
| Instructions: | | | | | | |
| Complete this form if you, the regist title and/or duplicate/substitute plat | | | | vice to submi | t an application for duplicate | |
| 1. REGISTERED OWNER OF RI | ECORD OR NEW R | EGISTERED C | WNER | | | |
| TRUE FULL NAME (LAST, FIRST, MIDDLE) | | | | | | |
| RESIDENCE OR BUSINESS ADDRESS | APT/SPACE NUMBER | CITY | STATE | ZIP CODE | DL/ID NUMBER | |
| MAILING ADDRESS (IF DIFFERENT FROM ABOVE) | APT/SPACE NUMBER | CITY | STATE | ZIP CODE | TELEPHONE NUMBER | |
| 2. LICENSED REGISTRATION S | SERVICE INFORMA | TION | | | | |
| NAME OF REGISTRATION SERVICE | ME OF REGISTRATION SERVICE PRINTED NAME OF AGENT | | | | | |
| ADDRESS | APT/SPACE NUMBER | CITY | STATE | ZIP CODE | OL NUMBER | |
| MAILING ADDRESS (IF DIFFERENT FROM ABOVE) | APT/SPACE NUMBER | CITY | STATE | ZIP CODE | TELEPHONE NUMBER | |
| 3. NOTARIZED SIGNATURE OF | REGISTERED OW | NER | | | | |
| The undersigned, registered owner, entered on the application for dupli | | | | | | |
| SIGNATURE OF REGISTERED OWNER | · | | | | DATE | |
| State of California |) | | | | | |
| County of |) | | | | | |
| On | before me, | | | | | |
| personally appeared | | | | | | |
| personally known to me (or proved to the within instrument and acknown his/her signature on the instrument | wledged to me that I | he/she execute | d the same in | • | | |
| WITNESS my hand and official sea | al, | | | | | |
| | | | | (NOTARY SEAL) | | |
| Notary Signature | | | | | | |